

Substitute for form 1449/PTO (Revised 04/2003)		Complete if Known	
		Application Number	10/659,135
<b>INFORMATION DISCLOSURE STATEMENT BY APPLICANT</b> <i>(Use as many sheets as necessary)</i>		Filing Date	Concurrently herewith
		First Named Inventor	Quantz et al.
		Group Art Unit	1761
		Examiner Name	Simone
		Attorney Docket Number	030676/267282
Sheet	1	of	1

**INFORMATION DISCLOSURE  
STATEMENT BY APPLICANT**

*(Use as many sheets as necessary)*

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## U. S. PATENT DOCUMENTS

## **FOREIGN PATENT DOCUMENTS**

Examiner  
Signature

T.F. Simone

Date Considered

03/29/04

\*Examiner: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant. #4609680v1